



Business Quality Assurance International

# Application for Registration & Contract

Woodvale House  
Clarinbridge  
Galway  
Ireland  
Telephone: +353 +91 796017  
Fax: +353 +91 796434  
Email: info@bqai.ie

Company Name:

Address:

Telephone:

Fax:

Email:

Contact:

Position:

Deputy:

Position:

**Please indicate type of registration required (please tick):**

ISO 9001:2008

Total No. of Employees

ISO 14001:2004

No. at this address

OHSAS 18001:2007

No. of Subsidiary locations

Other (Please state) \_\_\_\_\_

Yes / No

Enquiry and Questionnaire Form Submitted?

**Primary Business Area:**

**Scope for which registration is sought:**

**Other Information:**

- (a) Details of approvals granted by other certification bodies:
- (b) Details of any Trade Associations of which the company is a member:
- (c) If the company is part of a group, please specify parent organisation:
- (d) Are any company processes outsourced?
- (e) Do you use a consultancy to support / implement you management system?

**I/We undertake to pay all costs required under the Regulations governing the BQAI System for the Registration of Businesses of Assessed Capability connected with assessment and administration in the pre-registration stage, irrespective of the eventual granting of a Certificate of Registration.**

**In the event of being granted a Certificate of Registration, I/We undertake to conform to the Regulations governing the BQAI System for the Registration of Businesses of Assessed Capability, and in particular to pay all fees charged.**

**I/We accept that any Registration Contract entered into will be a three year Contract, subject to the terms and conditions of the Regulations (BQA-06), and that notice of an intention not to renew a Certificate of Registration must be given to BQAI in writing 90 days before the end of this three year date.**

Authorised Signatory.....

Position.....

Print name.....

Date.....